

|                           |          |        |          |
|---------------------------|----------|--------|----------|
| POSITION                  | INITIALS | ID NO. | DATE     |
|                           | AS       |        | 05/03/00 |
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 15     | 5200     |
| FORMALITY REVIEW          | NH       | 617    | 6-22-00  |
| RESPONSE FORMALITY REVIEW | LH       | 60105  | 9-30-00  |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | ✓     | ✓        | 02/03/00 |
| 2     | ✓     | ✓        | 02/03/00 |
| 3     | ✓     | ✓        | 02/03/00 |
| 4     | ✓     | ✓        | 02/03/00 |
| 5     | ✓     | ✓        | 02/03/00 |
| 6     | ✓     | ✓        | 02/03/00 |
| 7     | ✓     | ✓        | 02/03/00 |
| 8     | ✓     | ✓        | 02/03/00 |
| 9     | ✓     | ✓        | 02/03/00 |
| 10    | ✓     | ✓        | 02/03/00 |
| 11    | ✓     | ✓        | 02/03/00 |
| 12    | ✓     | ✓        | 02/03/00 |
| 13    | ✓     | ✓        | 02/03/00 |
| 14    | ✓     | ✓        | 02/03/00 |
| 15    | ✓     | ✓        | 02/03/00 |
| 16    | ✓     | ✓        | 02/03/00 |
| 17    | ✓     | ✓        | 02/03/00 |
| 18    | ✓     | ✓        | 02/03/00 |
| 19    | ✓     | ✓        | 02/03/00 |
| 20    | ✓     | ✓        | 02/03/00 |
| 21    | ✓     | ✓        | 02/03/00 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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